

MIT: COMPLETED APPLICATION, TAX
EMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

RECEIVED
Date Stamp (Received)

MAR 18 2022

Bayfield Co.
Planning and Zoning Agency

Permit #:	22-0106
Date:	6-12-2022
Amount Paid:	\$175 Special Use - A 3-25-22 JLG
Other:	
Refund:	



INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED		<input type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input checked="" type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER	
Owner's Name:		MAYRON + BARBARA ROUSTERS		Mailing Address:		1312 89TH ST		City/State/Zip:		54017		NEW RICHMOND, WI		Telephone:	
Address of Property:		45520 MARSH LN.		City/State/Zip:		CABLE, WI 54821								Cell Phone: 715 684-9150	
Email: (print clearly)		MBROUSE@DOARDRILL.COM													
Contractor:		LANCE ROUSSEAU		Contractor Phone:				Plumber:						Plumber Phone:	
Authorized Agent: (Person Signing Application on behalf of Owner(s))		KARL KASTORSKY		Agent Phone:		715-580-0157		Agent Mailing Address (include City/State/Zip):		54821		14295 MCNAUGHT RD CABLE, WI		Written Authorization Required (for Agent)	
PROJECT LOCATION		Legal Description: (Use Tax Statement)		Tax ID#		24423		Recorded Document: (Showing Ownership)		2012R		477903			
1/4, 1/4		Gov't Lot 8		Lot(s)		CSM		Vol & Page		CSM Doc #		Lot(s) #		Block #	
Section 4		Township 43		N, Range 6		W		Town of:		NORWAGON		Lot Size		Acreage 54.89	

<input checked="" type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes--continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes--continue →	Distance Structure is from Shoreline : 76 feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$ 10,000	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: Septic Tank	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/>	<input type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Year Round	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>

Existing Structure: (if addition, alteration or business is being applied for)	Length: _____	Width: _____	Height: _____
Proposed Construction: (overall dimensions)	Length: 440	Width: 15	Height: _____

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
<input type="checkbox"/> Commercial Use		with a Deck	(X)	
		with (2nd) Deck	(X)	
		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input checked="" type="checkbox"/> Other: (explain) SHORELAND ECP0146	(440 X 15)	6,600	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____ (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)	Date: _____
Authorized Agent: _____ (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)	Date: 12/3/2021
Address to send permit: 14295 MCNAUGHT RD CABLE, WI 54821	Attach Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Back to Tracy - 4/26 - rev'd back 4-27; back 4-28-22

Turn Over



In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

- (1) Show Location of:

Proposed Construction
- (2) Show / Indicate:

North (N) on Plot Plan
- (3) Show Location of (*):

(*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show:

All Existing Structures on your Property
- (5) Show:

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*):

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*):

(*) Wetlands; or (*) Slopes over 20%

Fill Out in Ink – NO PENCIL

SEE ATTACHED

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements
Setback from the Centerline of Platted Road	> 1000 Feet		Setback from the Lake (ordinary high-water mark)	> 160 Feet
Setback from the Established Right-of-Way	> 1000 Feet		Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	> 80 Feet			
Setback from the South Lot Line	> 160 Feet		Setback from Wetland	> 80 Feet
Setback from the West Lot Line	> 150 Feet		20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	100 Feet		Elevation of Floodplain	1397.68 Feet
Setback to Septic Tank or Holding Tank	> 100 Feet		Setback to Well	250' Feet
Setback to Drain Field	> 50 Feet			
Setback to Privy (Portable, Composting)	Feet			

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s): All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Not Served To Future structure

Issuance Information (County Use Only)	Sanitary Number: 367221	# of bedrooms: 2	Sanitary Date: 6/5/00			
Permit Denied (Date):	Reason for Denial:					
Permit #: 22-0106	Permit Date: 6-12-2022					
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s))	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No				
Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Inspection Record:	Zoning District (R-1)			Lakes Classification (1)		
Date of Inspection: 4/5/22	Inspected by: [Signature]			Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.)						
-USE Best Management Practices for Soil Erosion						
Signature of Inspector: [Signature]			Date of Approval: 4/11/22			
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>			

TOWN BOARD RECOMMENDATION -- (CLASS A - SPECIAL USE)

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department
P.O. Box 58 - Washburn, WI 54891
Phone - (715) 373-6138
Fax - (715) 373-0114
e-mail: zoning@bayfieldcounty.org

Website:
www.bayfieldcounty.org/147

Date Zoning Received: (Stamp Here)

Property Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 1/2 x 14) [front/back]. This is a Class A special use request. Note: The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. Ask Town if you should be present at their meeting(s).

Property Owner MYRON J. & BALBOGA L. BOESE TRUSTEES Contractor MARK RASMUSSEN
Property Address 45520 MARSH LANE Authorized Agent PAUL KASTROSKI
CABLE WI 54821 Agent's Telephone 715-580-0157
Telephone 715-684-9150 Written Authorization Attached: Yes () No ()

Accurate Legal Description involved in this request (specify only the property involved with this application)

1/4 of 1/4, Section 4, Township 43 N., Range 6 W. Town of NAMAKAGON
Govt. Lot 8 Lot Block Subdivision CSM#

Volume Page of Deeds Tax I.D.# 24423 Acreage 5-4.89

Additional Legal Description:

Applicant: (State what you are asking for) SHORELAND GRADING PERMIT TO CONSTRUCT DRIVEWAY TO NEW BUILDING SITE. Zoning District: R-1 Lakes Classification

We, the Town Board, TOWN OF Namakagon, do hereby recommend to

☐ Table

☒ Approval

☐ Disapproval

Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: ☒ Yes ☐ No

Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)

It is compliant with our Comp. Plan.

** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM:

1. The Tabled, Approval or Disapproval box checked
2. The Town's reasoning for the tabling, approval or disapproval
3. The form returned to Zoning Department not a copy or fax

** NOTE:

Receiving Town Board approval, does not allow the start of construction or business, you must first obtain your permit card(s) from the Planning and Zoning Department.

Revised: November 2017

Signed:

Chairman: [Signature]

Supervisor: [Signature]

Supervisor: [Signature]

Supervisor: [Signature]

Clerk: [Signature]

Date: 12-15-21

FLOOD ELEVATION SURVEY
PART OF GOVERNMENT LOT 8 OF SECTION 4, T. 43 N., R. 6 W.,
IN THE TOWN OF NAMAKAGON, BAYFIELD COUNTY, WISCONSIN

RECEIVED

MAR 18 2022

Bayfield Co.
Planning and Zoning Agency



NOTES:
THE ORDINARY HIGH WATER LINE (OHWL) OF LAKE NAMAKAGON, THE UNDEVELOPED WETLANDS AND THE 75' SETBACK SHOWN ARE APPROXIMATE AND FOR REFERENCE AND NON REGULATORY PURPOSES ONLY.
ANY LAND BELOW THE ORDINARY HIGH WATER LINE OF A LAKE OR A NAVIGABLE STREAM IS SUBJECT TO THE PUBLIC TRUST IN NAVIGABLE WATERS THAT IS ESTABLISHED UNDER ARTICLE IX, SECTION 1 OF THE STATE CONSTITUTION.
THE DATE LINE OF EXISTING STRUCTURES IS SHOWN.

ELEVATION DATA
ELEVATIONS ARE NAVD83 (FT).
CONTOUR INTERVAL EQUALS ONE FOOT.
THE REGIONAL FLOOD ELEVATION OF LAKE NAMAKAGON IS 1397.68 NAVD83.
BM-1 - 8" SPIKE IN THE WEST FACE OF 20" BASSWOOD
ELEV. - 1401.51
THE LOWEST GROUND ELEVATION ON THE AREA TO BE REMOVED FROM THE FLOOD ZONE IS 1386.0 NAVD83

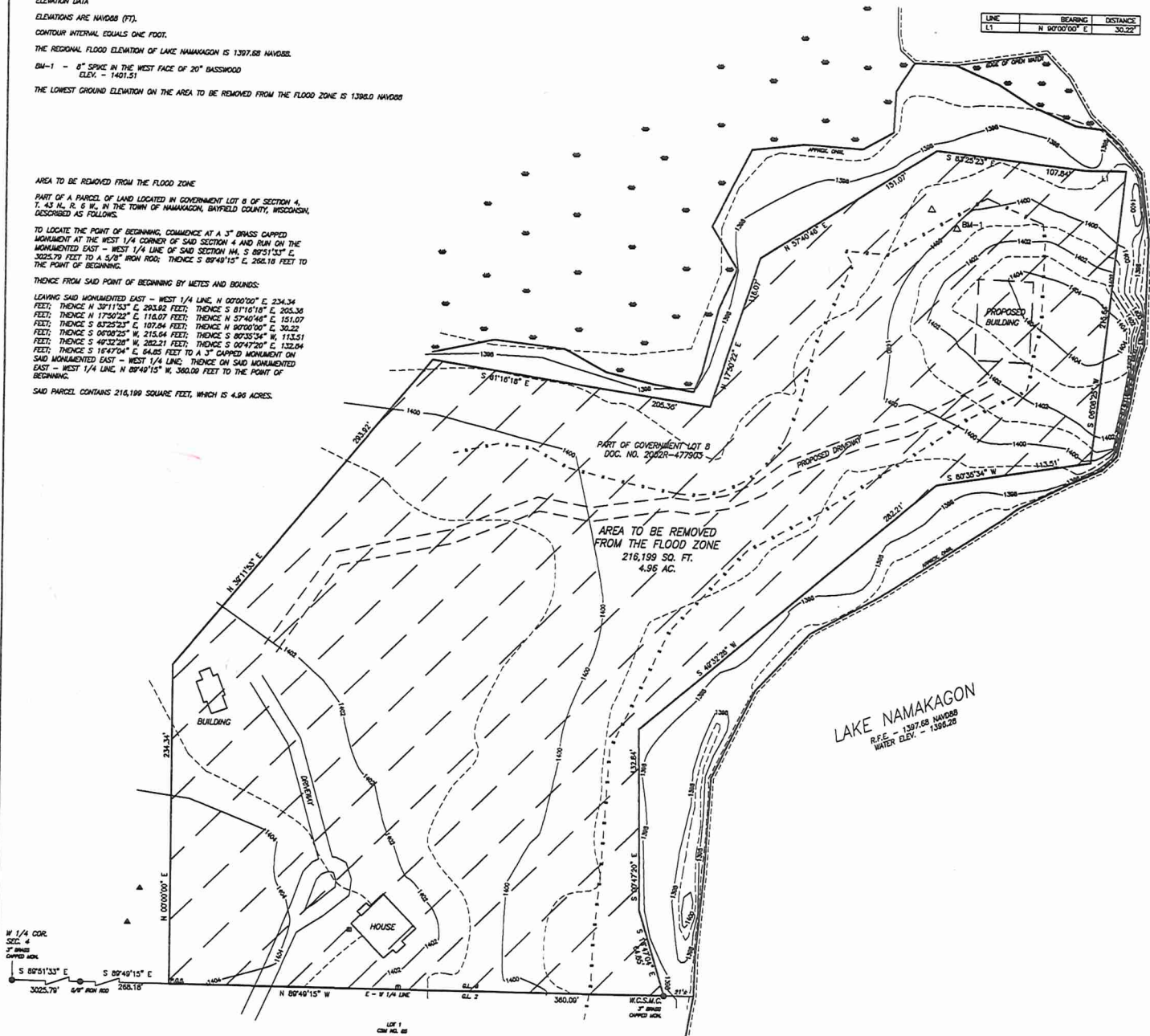
AREA TO BE REMOVED FROM THE FLOOD ZONE
PART OF A PARCEL OF LAND LOCATED IN GOVERNMENT LOT 8 OF SECTION 4,
T. 43 N., R. 6 W., IN THE TOWN OF NAMAKAGON, BAYFIELD COUNTY, WISCONSIN,
DESCRIBED AS FOLLOWS:

TO LOCATE THE POINT OF BEGINNING, COMMENCE AT A 3" BRASS CAPPED
MONUMENT AT THE WEST 1/4 CORNER OF SAID SECTION 4 AND RUN ON THE
MONUMENTED EAST - WEST 1/4 LINE OF SAID SECTION 4, S 89°51'33" E,
3025.79 FEET TO A 5/8" IRON ROD; THENCE S 89°48'15" E, 265.18 FEET TO
THE POINT OF BEGINNING.

THENCE FROM SAID POINT OF BEGINNING BY METES AND BOUNDS:

LEAVING SAID MONUMENTED EAST - WEST 1/4 LINE, N 07°00'00" E, 234.34
FEET; THENCE N 38°11'53" E, 293.92 FEET; THENCE S 81°16'18" E, 305.35
FEET; THENCE N 17°50'22" E, 116.07 FEET; THENCE N 57°40'48" E, 151.07
FEET; THENCE S 83°52'23" E, 107.84 FEET; THENCE N 80°00'00" E, 36.22
FEET; THENCE S 09°00'25" W, 215.64 FEET; THENCE S 80°35'34" W, 113.51
FEET; THENCE S 49°32'28" W, 282.21 FEET; THENCE S 00°47'20" E, 132.64
FEET; THENCE S 18°47'04" E, 64.63 FEET TO A 3" CAPPED MONUMENT ON
SAID MONUMENTED EAST - WEST 1/4 LINE; THENCE ON SAID MONUMENTED
EAST - WEST 1/4 LINE, N 89°48'15" W, 380.06 FEET TO THE POINT OF
BEGINNING.

SAID PARCEL CONTAINS 216,199 SQUARE FEET, WHICH IS 4.96 ACRES.



SURVEYOR'S CERTIFICATE

I, JASON R. NELSON, PROFESSIONAL LAND SURVEYOR IN THE STATE OF WISCONSIN, HEREBY CERTIFY:
THAT ON THE ORDER OF MICHAEL BROSE, I HAVE MADE A FLOOD ELEVATION DETAIL OF PART OF A PARCEL
OF LAND LOCATED IN GOVERNMENT LOT 8 OF SECTION 4, T. 43 N., R. 6 W., IN THE TOWN OF
NAMAKAGON, BAYFIELD COUNTY, WISCONSIN;
THAT THIS MAP IS A TRUE REPRESENTATION OF SAID SURVEY; AND
THAT SAID SURVEY AND MAP ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

JASON R. NELSON PLS - 3092

LEGEND
● MONUMENT, AS NOTED, FOUND
() RECORDED DATA
- - - APPROX. 75' SETBACK LINE
■ UNDEVELOPED WETLANDS
△ CHUTE BEACHWAY

▲ SEPTIC VENT
● SEPTIC COVER
■ WELL

CLIENT: MICHAEL BROSE
JOB NO: 1021/
SCALE: 1" = 50'
NS. 9-31 PG.
FIELD WORK COMPLETED: 03/24/21

FILE: N\743930\SEC4
ADAD: 1021_BROSE_FEMA
COORD: N1E_099

HEART OF THE NORTH
SURVEYING OF HAYWARD, INC.

10339N DUFFY ROAD
HAYWARD, WI 54843
PH: 715/634-2442
FAX: 715/634-6444
WWW.HONSURVEYING.COM

RECEIVED

MAR 18 2022

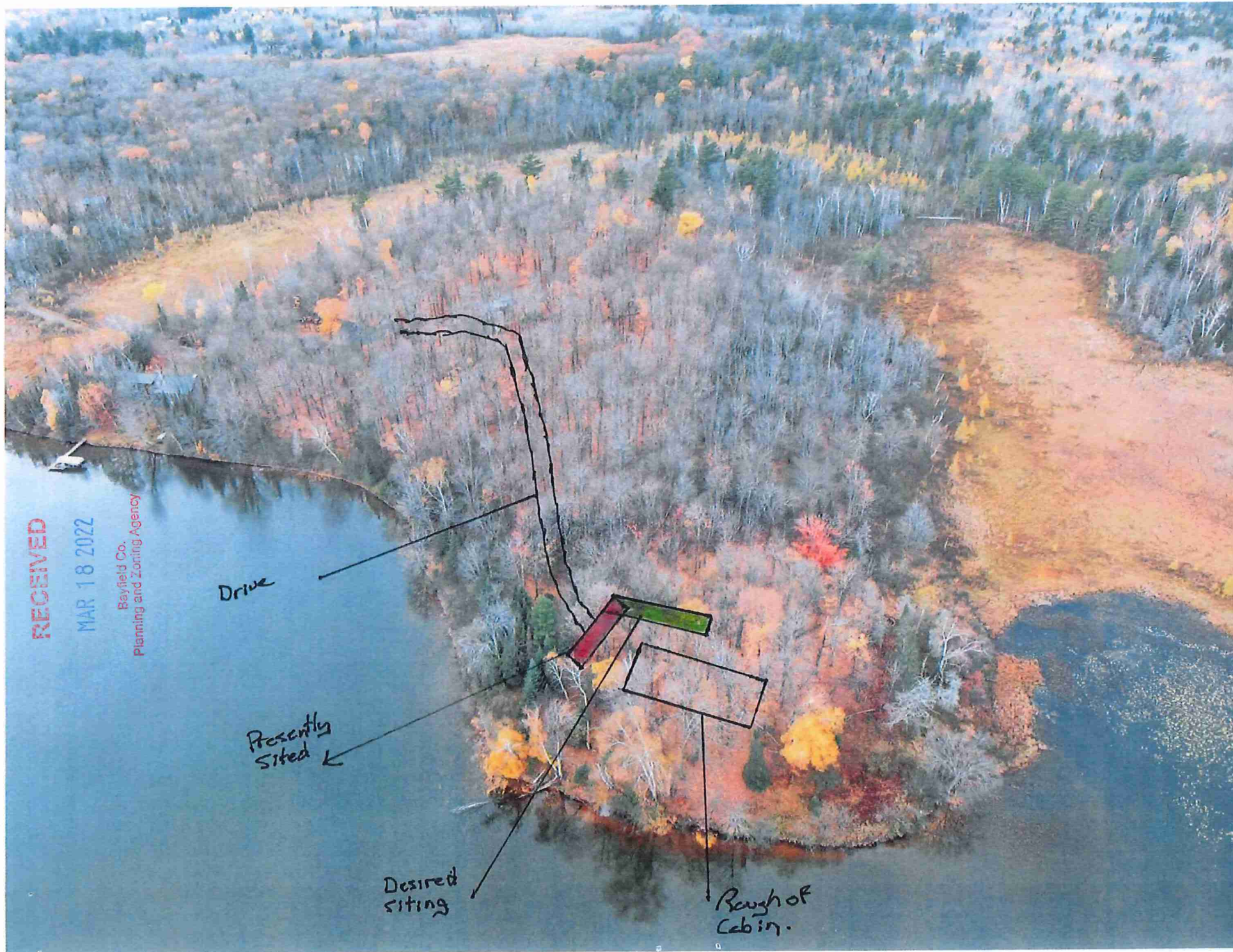
Bayfield Co.
Planning and Zoning Agency

Drive

Presently
Sited

Desired
siting

Rough of
Cabin.



MAR 18 2022

DEPARTMENT OF HOMELAND SECURITY - FEDERAL EMERGENCY MANAGEMENT AGENCY
PROPERTY INFORMATION FORMBayfield Co.
O.M.B. NO. 1660-0015
Expires February 28, 2014

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 1.63 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and submitting the form. This collection is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 1800 South Bell Street, Arlington, VA 20598-3005, Paperwork Reduction Project (1660-0015). **NOTE: Do not send your completed form to this address.**

This form may be completed by the property owner, property owner's agent, licensed land surveyor, or registered professional engineer to support a request for a Letter of Map Amendment (LOMA), Conditional Letter of Map Amendment (CLOMA), Letter of Map Revision Based on Fill (LOMR-F), or Conditional Letter of Map Revision Based on Fill (CLOMR-F) for existing or proposed, single or multiple lots/structures. In order to process your request, all information on this form must be completed **in its entirety**, unless stated as optional. **Incomplete submissions will result in processing delays.** Please check the item below that describes your request:

<input checked="" type="checkbox"/> LOMA	A letter from DHS-FEMA stating that an existing structure or parcel of land that has not been elevated by fill (natural grade) would not be inundated by the base flood.
<input type="checkbox"/> CLOMA	A letter from DHS-FEMA stating that a proposed structure that is not to be elevated by fill (natural grade) would not be inundated by the base flood if built as proposed.
<input type="checkbox"/> LOMR-F	A letter from DHS-FEMA stating that an existing structure or parcel of land that has been elevated by fill would not be inundated by the base flood.
<input type="checkbox"/> CLOMR-F	A letter from DHS-FEMA stating that a parcel of land or proposed structure that will be elevated by fill would not be inundated by the base flood if fill is placed on the parcel as proposed or the structure is built as proposed.

Fill is defined as material from any source (including the subject property) placed that raises the ground to or above the Base Flood Elevation (BFE). The common construction practice of removing unsuitable existing material (topsoil) and backfilling with select structural material is not considered the placement of fill if the practice does not alter the existing (natural grade) elevation, which is at or above the BFE. **Fill that is placed before the date of the first National Flood Insurance Program (NFIP) map showing the area in a Special Flood Hazard Area (SFHA) is considered natural grade.**

Has fill been placed on your property to raise ground that was previously below the BFE?

☐ Yes ☒ No

If yes, when was fill placed?

/
month/year

Will fill be placed on your property to raise ground that is below the BFE?

☐ Yes* ☒ No

If yes, when will fill be placed?

/
month/year

* If yes, Endangered Species Act (ESA) compliance must be documented to FEMA prior to issuance of the CLOMR-F determination (please refer page 4 to the MT-1 instructions).

- Street Address of the Property (if request is for multiple structures or units, please attach additional sheet referencing each address and enter street names below):
45530 Marsh Lane Cable, WI 54821
- Legal description of Property (Lot, Block, Subdivision or abbreviated description from the Deed):
Part of Government Lot 8 of Sec. 4, T43N, R6W, Town of Cable, Bayfield Co, WI
- Are you requesting that a flood zone determination be completed for (check one):
 - ☐ Structures on the property? What are the dates of construction? (MM/YYYY)
 - ☒ A portion of land within the bounds of the property? (A certified metes and bounds description and map of the area to be removed, certified by a licensed land surveyor or registered professional engineer, are **required**. For the preferred format of metes and bounds descriptions, please refer to the MT-1 Form 1 Instructions.)
 - ☐ The entire legally recorded property?
- Is this request for a (check one):
 - ☐ Single structure
 - ☒ Single lot
 - ☐ Multiple structures (How many structures are involved in your request? List the number: 0)
 - ☐ Multiple lots (How many lots are involved in your request? List the number:)

MAR 18 2022

DEPARTMENT OF HOMELAND SECURITY - FEDERAL EMERGENCY MANAGEMENT AGENCY
ELEVATION FORMBayfield Co. O.M.B. NO. 1660-0015
Planning and Zoning Agency
Expires February 28, 2014

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 1.25 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and submitting the form. This collection is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 1800 South Bell Street, Arlington, VA 20598-3005, Paperwork Reduction Project (1660-0015). **NOTE: Do not send your completed form to this address.**

This form must be completed for requests and must be completed and signed by a registered professional engineer or licensed land surveyor. **A DHS - FEMA National Flood Insurance Program (NFIP) Elevation Certificate may be submitted in lieu of this form for single structure requests.**

For requests to remove a structure on natural grade OR on engineered fill from the Special Flood Hazard Area (SFHA), submit the lowest adjacent grade (the lowest ground touching the structure), **including an attached deck or garage**. For requests to remove an entire parcel of land from the SFHA, provide the lowest lot elevation; or, if the request involves an area described by metes and bounds, provide the lowest elevation within the metes and bounds description. All measurements are to be rounded to nearest tenth of a foot. In order to process your request, all information on this form must be completed **in its entirety**. **Incomplete submissions will result in processing delays.**

1. NFIP Community Number: 550539 Property Name or Address: 45530 Marsh Lane Cable, WI 54821
2. Are the elevations listed below based on ☒ **existing** or ☐ **proposed** conditions? (Check one)
3. For the existing or proposed structures listed below, what are the types of construction? (check all that apply)
☐ crawl space ☐ slab on grade ☐ basement/enclosure ☐ other (explain)
4. Has DHS - FEMA identified this area as subject to land subsidence or uplift? (see instructions) ☐ Yes ☒ No
If yes, what is the date of the current re-leveling? / (month/year)
5. What is the elevation datum? ☐ NGVD 29 ☒ NAVD 88 ☐ Other (explain)
If any of the elevations listed below were computed using a datum different than the datum used for the effective Flood Insurance Rate Map (FIRM) (e.g., NGVD 29 or NAVD 88), what was the conversion factor?
Local Elevation +/- ft. = FIRM Datum
6. Please provide the Latitude and Longitude of the most upstream edge of the **structure** (in decimal degrees to the nearest fifth decimal place):
Indicate Datum: ☐ WGS84 ☐ NAD83 ☐ NAD27 Lat. Long.
Please provide the Latitude and Longitude of the most upstream edge of the **property** (in decimal degrees to the nearest fifth decimal place):
Indicate Datum: ☒ WGS84 ☐ NAD83 ☐ NAD27 Lat. 46.02355 Long. 91.11883

Address	Lot Number	Block Number	Lowest Lot Elevation*	Lowest Adjacent Grade To Structure	Base Flood Elevation	BFE Source
Area to be removed			1398.0		1397.68	Bayfield Co. Zoning

This certification is to be signed and sealed by a licensed land surveyor, registered professional engineer, or architect authorized by law to certify elevation information. All documents submitted in support of this request are correct to the best of my knowledge. I understand that any false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section 1001.

Certifier's Name: Jason R. Nelson	License No.: PLS No. 3092	Expiration Date: January 31, 2024
Company Name: Heart of the North Surveying	Telephone No.: (715) 682-2692	
Email:	Fax No. (715) 682-5100	
Signature:	Date: February 24, 2022	

* For requests involving a portion of property, include the lowest ground elevation within the metes and bounds description.
Please note: If the Lowest Adjacent Grade to Structure is the only elevation provided, a determination will be issued for the structure only.

Seal (optional)

RECEIVED

MAR 18 2022

Bayfield Co.
Planning and Zoning Agency

Karl Kastrosky
Land Development & Zoning Consultant

14295 McNaught Rd. Cable, WI 54821

715-580-0157

Kastrosky821@gmail.com

To Whom it may concern,

I hereby authorize **Karl Kastrosky** to act as my agent to procure permits and

access information pertaining to my property at 45520 MARSH LN.

in the Town of Nemadji County of Bayfield

(M.K. Brose)

Signature

11/30/21

Date

My contact information is:

Address: 1312 89th St. New Richmond, WI 54677

Phone: 715-684-9150

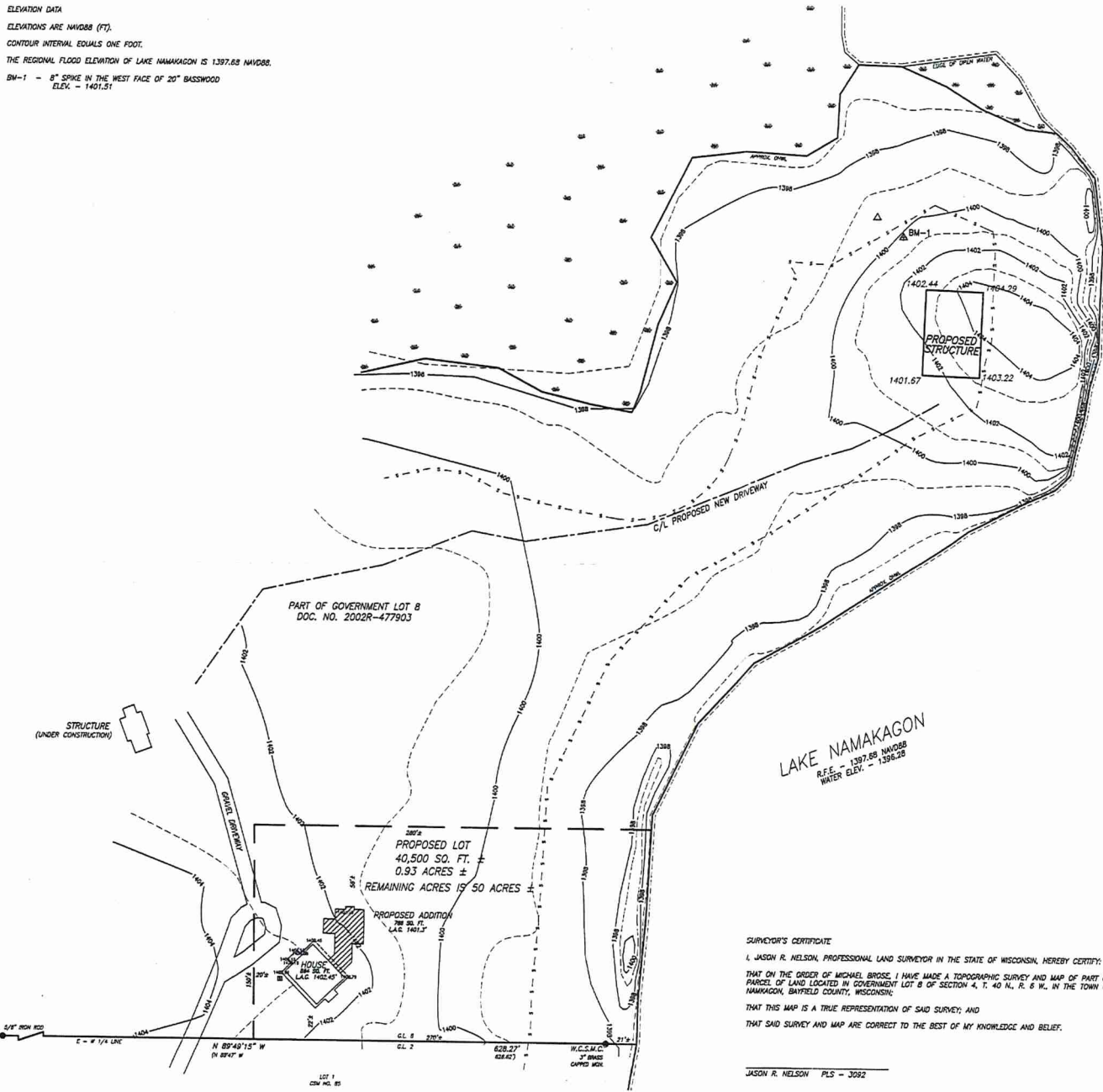
Email: mbrose@doordrill.com

TOPOGRAPHIC SURVEY

LOCATED IN GOVERNMENT LOT 8 OF SECTION 4, T. 43 N., R. 6 W.,
IN THE TOWN OF NAMAKAGON, BAYFIELD COUNTY, WISCONSIN

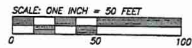
NOTES:
THE ORDINARY HIGH WATER LINE (OHWL) OF LAKE NAMAKAGON, THE UNDELINEATED WETLANDS AND THE 75' SETBACK SHOWN ARE APPROXIMATE AND FOR REFERENCE AND NON REGULATORY PURPOSES ONLY.
ANY LAND BELOW THE ORDINARY HIGH WATER LINE OF A LAKE OR A NAVIGABLE STREAM IS SUBJECT TO THE PUBLIC TRUST IN NAVIGABLE WATERS THAT IS ESTABLISHED UNDER ARTICLE IX, SECTION 1 OF THE STATE CONSTITUTION.
THE EAVE LINE OF EXISTING STRUCTURES IS SHOWN.

ELEVATION DATA
ELEVATIONS ARE NAVD88 (FT).
CONTOUR INTERVAL EQUALS ONE FOOT.
THE REGIONAL FLOOD ELEVATION OF LAKE NAMAKAGON IS 1397.88 NAVD88.
BM-1 - 2" SPIKE IN THE WEST FACE OF 20" BASSWOOD
ELEV. - 1401.51



SURVEYOR'S CERTIFICATE
I, JASON R. NELSON, PROFESSIONAL LAND SURVEYOR IN THE STATE OF WISCONSIN, HEREBY CERTIFY:
THAT ON THE ORDER OF MICHAEL BROSE, I HAVE MADE A TOPOGRAPHIC SURVEY AND MAP OF PART OF A PARCEL OF LAND LOCATED IN GOVERNMENT LOT 8 OF SECTION 4, T. 40 N., R. 6 W., IN THE TOWN OF NAMAKAGON, BAYFIELD COUNTY, WISCONSIN;
THAT THIS MAP IS A TRUE REPRESENTATION OF SAID SURVEY; AND
THAT SAID SURVEY AND MAP ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

JASON R. NELSON PLS - 3052
MARCH 2, 2022 REVISIONS
PROPOSED BUILDING ADDITION TO EXISTING HOUSE AND PRELIMINARY LOT DESIGN BY LARRY T. NELSON,
PLS - 1276



LEGEND
● MONUMENT, AS NOTED, FOUND
() RECORDED DATA
- - - APPROX. 75' SETBACK LINE
~ ~ ~ UNDELINEATED WETLANDS
△ CHISEL BENCHMARK
▲ SEPTIC VENT
○ SEPTIC COVER
■ WELL
1401.67 SPOT ELEVATION

CLIENT: MICHAEL BROSE
JOB NO: H21/
SCALE: 1" = 50'
NR. B-31 PG.
FIELD WORK COMPLETED: 03/26/21

FILE: N\743\NRW\SEC4
ACAD: H21_BROSE
COORD: N16_099
REVISED: 8/19/21

HEART OF THE NORTH
SURVEYING OF HAYWARD, INC.

10339N DUFFY ROAD
HAYWARD, WI 54843
PH: 715/634-2442
FAX: 715/634-6444
WWW.HONSURVEYING.COM

MAR 18 2022

Real Estate Bayfield County Property Listing

Today's Date: 7/29/2021

Property Status: Current

Created On: 3/15/2006 1:15:47 PM

Description		Updated: 5/31/2013
Tax ID:	24423	
PIN:	04-034-2-43-06-04-1 05-008-10000	
Legacy PIN:	034104804990	
Map ID:		
Municipality:	(034) TOWN OF NAMAKAGON	
STR:	S04 T43N R06W	
Description:	GOVT LOT 8 LYING WEST OF JACKSON LAKE CHANNEL (BROSE REV TRUST) 2002R-477903	
Recorded Acres:	54.890	
Calculated Acres:	50.939	
Lottery Claims:	0	
First Dollar:	Yes	
Zoning:	(R-1) Residential-1	
ESN:	123	


Tax Districts		Updated: 3/15/2006
1	STATE	
04	COUNTY	
034	TOWN OF NAMAKAGON	
041491	SCHL-DRUMMOND	
001700	TECHNICAL COLLEGE	

Recorded Documents		Updated: 3/15/2006
CONVERSION		
Date Recorded:	477903 532-48;840-1036	

Ownership		Updated: 5/31/2013
Bayfield Co. Planning and Zoning Agency		
MYRON J & BARBARA L BROSE TRUSTEES		CABLE WI

Billing Address:	Mailing Address:
MYRON J & BARBARA L BROSE TRUSTEES PO BOX 537 CABLE WI 54821	MYRON J & BARBARA L BROSE TRUSTEES PO BOX 537 CABLE WI 54821

Site Address	* indicates Private Road
N/A	



Property Assessment

Updated: 11/9/2007

2021 Assessment Detail			
Code	Acres	Land	Imp.
G1-RESIDENTIAL	1.000	48,800	69,600
G5-UNDEVELOPED	12.000	3,600	0
G6-PRODUCTIVE FOREST	41.890	146,600	0
2-Year Comparison			
	2020	2021	Change
Land:	199,000	199,000	0.0%
Improved:	69,600	69,600	0.0%
Total:	268,600	268,600	0.0%

Property History	
N/A	

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X (Shoreland)**

SANITARY –

SIGN –

SPECIAL(A) – **X**

CONDITIONAL –

BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **22-0106** Issued To: **Myron & Barbara Brose**

Location: $\frac{1}{4}$ of $\frac{1}{4}$ Section **4** Township **43** N. Range **6** W. Town of **Namakagon**

Gov't Lot **8** Lot Block Subdivision CSM#
Lying West of Jackson Lake Channel in Doc 2022R-594367

Residential

For: **Other: [Shoreland Grading], (440' x 15') = 6600 sq. ft.**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Use best management practices to limit and prevent erosion during construction. State and/or Federal may require permitting (if applicable)

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

June 12, 2022

Date

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE - (Shoreland)
SANITARY -
SIGN -
SPECIAL(A) -
CONDITIONAL -
BOA -

BAYFIELD COUNTY

PERMIT

ON THE PREMISES DURING CONSTRUCTION
WEATHERIZE AND POST THIS PERMIT

Issued To: Myron & Barbara Brose 22-0106

Location: N of N Section 4 Township 43 N Range 8 W Town of Namskagon

Gov't Lot 8 Block Subdivision
Lying West of Jackson Lake Channel in Doc 2022R-594367

Residential
For Other: [Shoreland Grading] (440' x 15') = 6600 sq. ft.
(Disclaimer: A lot of 6600 sq. ft. is required for a 100' wide building)

Condition(s): Use best management practices to limit and prevent erosion and sedimentation.
and/or Federal and state permitting (if applicable)

NOTE: This permit expires one year from date of issuance if the authorized construction
work on land use has not begun

Changes in plans or specifications shall not be made without obtaining approval.
This permit may be void or revoked if any of the application information is found
to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not
completed or if any protective conditions are violated.

Authorized Issuing Official

June 12, 2022

Date

Tacy Pooler

**Town, City, Village, State or Federal
Permits May Also Be Required**

LAND USE - X
SANITARY - 12673
SIGN -
SPECIAL - NA
CONDITIONAL -
BOA -

BAYFIELD COUNTY PERMIT

**WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION**

No: 05022201-2022

Tax ID: 24485

Issued To: DAVID A ZIMMERMAN

Location: LOT 3 CSM V.1 P.279 & LOT 4 Section 09
CSM V.2 P.154 (LOCATED IN GOVT LOT
3) IN V.626 P.378 355J

Township 43 N.

Range 06 W.

NAMAKAGON

Govt Lot 0

Lot

Block

Subdivision:

CSM#

For: Residential / Detached Garage / 48L x 35W x 10H

Condition(s): Not for human habitation or sleeping. Maintain setbacks - establish and direct half of shed roof rain water into retention basin. If pressurized water enters structure a sanitary permit is required prior.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any conditions are violated.

Tracy Pooler

Authorized Issuing Official

Wed Jun 15 2022

Date